Please type a plus sign (+) inside this box ⟶ [+]

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/066,505
Filing Date	January 31, 2002
First Named Inventor	Satoshi Haneda
Group Art Unit	1756
Examiner Name	Christopher Rodee
Attorney Docket Number	56232.17

Total Number of Pages in This Submission (excluding references)
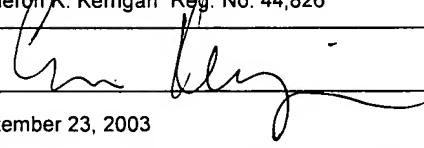
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SEP 29 2003
TC 1700

ENCLOSURES *(check all that apply)*

- ☒ Deposit Account 07-1850 Authorization
- ☒ Postage Paid Return Postcard
- ☒ Response (10 pages)
- ☐ Amendment Transmittal Letter (in duplicate)
  - ☐ Affidavits/declaration(s)
- ☒ Petition for Extension of Time (one month) (in duplicate)
- ☐ Information Disclosure Statement (in duplicate) with Form PTO-1449 and References
- ☒ Express Mail Label No. EV337979195
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/ Incomplete Application
  - ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers *(for an Application)*
- ☐ Drawing(s) In/Formal ____ Sheets with Submission of Drawings Transmittal
- ☐ Issue Fee Transmittal with PTO-85b (in duplicate)
- ☒ Request for Continued Examination Transmittal (RCE)
- ☒ Fee Transmittal Form (in duplicate)
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) ____

Remarks

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group *(Appeal Notice, Brief, Reply Brief)*
- ☐ Proprietary Information
- ☐ Request for Status of Application
- ☒ Postcard

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

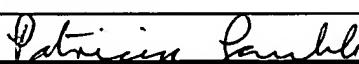| Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigan Reg. No. 44,826
Signature	
Date	September 23, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

Typed or printed name	Patricia Gamble		
Signature		Date	September 23, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

PTO/SB/17 (11/01) (modified)
Approved for use through 10/31/2002, OMB 0651-0032
Patent and Trademark Office; US DEPARTMENT OF COMMERCE

FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = **($) 860.00**

Complete if Known	
Application Number	**10/066,505**
Filing Date	**January 31, 2002**
First Named Inventor	**Satoshi Haneda**
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Examiner Name	**Christopher Rodee**
Attorney Docket Number	**56232.17**

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METHOD OF PAYMENT

1. The Commissioner is hereby authorized to:

[X] Charge the indicated fees to the below mentioned deposit account.

[X] Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.†

[ ] Applicant claims small entity status. See 37 CFR 1.27.

Deposit Account Number: **07-1850**
Deposit Account Name: **Squire, Sanders & Dempsey**

A Duplicate Copy of this authorization is attached

2. [ ] **Payment Enclosed:**
[ ] Check [ ] Other

FEE CALCULATION (fees effective 10/1/01)

1. FILING FEE

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
101/$750	201/$370	Utility Filing	
106/$330	206/$165	Design Filing	
108/$740	208/$370	Reissue	
114/$160	214/$80	Provisional Filing	

SUBTOTAL (1) [($)0]

2. CLAIMS

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
103/$18	203/$9	Claims in excess of 20
102/$84	202/$42	Independent claims in excess of 3
104/$280	204/$140	Multiple dependent claim
109/$84	209/$42	Reissue independent claims over original patent
110/$18	210/$9	Reissue claims in excess of 20 and over original patent

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
105/$130	205/$65	Surcharge - late filing fee or oath	
127/$50	227/$25	Surcharge-late provisional filing fee or cover sheet	
147/$2,520	147/$2,520	For filing a request for reexamination	
115/$110	215/$55	Extension for response within first month†	110
116/$400	216/$200	Extension for response within second month†	
117/$920	217/$460	Extension for response within third month†	
118/$1,440	218/$720	Extension for response within fourth month†	
128/$1,960	228/$980	Extension for response within fifth month†	
119/$320	219/$160	Notice of Appeal	
141/$1,280	241/$640	Petition to revive unintentionally abandoned application	
142/$1,280	242/$640	Utility Issue Fee (Or Reissue)	
143/$460	243/$230	Design Issue Fee	
122/$130	122/$130	Petitions to the Commissioner	
123/$50	123/$50	Petitions related to provisional applications	
126/$180	126/$180	Submission of Information Disclosure Statement	
581/$40	581/$40	Recording each patent assignment per property (times number of properties)	
146/$740	246/$370	Filing a submission after final rejection (37 CFR 1.129(a))	
179/$750	279/$370	Request for Continued Examination (RCE)	750

Other fee (specify):

Other fee (specify):

SUBTOTAL (3) [($)860.00]

For	(Col. 1) No. of Existing Claims		(Col. 2) Highest No. Previously Paid For			(Col. 3) Extra**		Fee		Fee Due
TOTAL	25	minus*	20	or	33	=	0	x	18	=	0
INDEP	3	minus*	3	or	3	=		x	84	=	0
[ ] First presentation of multiple dependent claim										=	0

* Subtract the greater number of Col. 2

** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) [($) 0]

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	**Cameron K. Kerrigan**	Reg. Number	**44.826**
Signature		Date	**September 23, 2003**

SanFrancisco/107559.1